THE RECOVERY KERNEL

Meeting Format — Complete Facilitator Script

Works for groups of 2 to 200. Works solo. No reading required to participate.

A Note to Facilitators

This script is designed so that everyone in the room can participate fully regardless of reading ability, educational background, or familiarity with recovery science. The facilitator reads from this script. Participants respond, share, and engage — they never need to read aloud unless they choose to.

The meeting does not explain the Kernel's science to participants. It puts them through the Kernel's practices. Understanding catches up to experience. The ritual is the medicine. Run the format first. Let the depth come later.

Bold text is spoken aloud. Text in [brackets] describes what you do. Each meeting runs 60–90 minutes. A shorter 45-minute version is marked with ★.

PHASE 1

THE OPENING

Approx. 10 minutes — sets the container for everything that follows

What This Phase Does

The opening creates the container — the shared agreement that this space is different from outside. It does four things in sequence: it states purpose (why we're here), it grounds the body (breath and water), it reads one grounding statement from the Kernel, and it invites personal check-in. By the end of the opening, every person in the room has spoken at least once.

[[Stand or sit. Make eye contact with the room. Pause for three full seconds before speaking.]]

FACILITATOR: Welcome to the Kernel. My name is [your name] and I'm running this meeting.

FACILITATOR: Before we say anything else — let's do the first thing the Kernel asks of us.

[[Hold up a glass of water.]]

FACILITATOR: Drink some water. If you don't have any, get some now. We'll wait.

[[Pause 20 seconds.]]

FACILITATOR: Now take one slow breath with me. In through the nose —

[[Breathe in audibly for 4 counts.]]

FACILITATOR: Hold —

[[Hold 4 counts.]]

FACILITATOR: Out through the mouth —

[[Exhale audibly for 6 counts.]]

FACILITATOR: Good. Your nervous system just got the first signal that this moment is different.

THE PURPOSE STATEMENT

FACILITATOR: Here is why we're here. Say it with me if you know it. Listen if you don't yet.

FACILITATOR: We are not broken.

EVERYONE: We are not broken.

FACILITATOR: We are running on biology that was never properly explained to us.

EVERYONE: We are running on biology that was never properly explained to us.

FACILITATOR: We are here to understand that biology, and build a life that works with it.

EVERYONE: We are here to understand that biology, and build a life that works with it.

FACILITATOR: Not through willpower. Through knowledge, and practice, and each other.

EVERYONE: Not through willpower. Through knowledge, and practice, and each other.

★ THE OPENING READING — One sentence from the Kernel

FACILITATOR: Each meeting opens with one sentence from the Kernel. Tonight's sentence is:

[[Read the sentence for this session from the Session Card or rotate through the list below.]]

Opening Sentence Rotation — 12 sentences, one per meeting cycle

- 1. You were not weak. You were running on the wrong repair manual.
- 2. Recovery is not about becoming someone different. It is about understanding who you actually are.
- 3. Crises are not evidence that you are broken. They are evidence that you have a nervous system.
- 4. The substance was solving a problem. Recovery means finding a better solution to the same problem.
- 5. What you needed was real. The way you got it was the only way you knew.
- 6. The biology can be supported. The bottleneck can be bypassed.

- 7. Your brain learned to optimize for something that harmed you. The same brain can learn to optimize for something that doesn't.
- 8. You cannot think your way out of a chemistry problem. But you can address the chemistry.
- 9. Isolation is a logical response to a depleted nervous system. Connection is the way back.
- 10. The repair takes time. The time passes anyway.
- 11. This state is temporary. It has always been temporary. It will be temporary again.
- 12. You are doing this.

[[After reading the sentence, pause. Then ask:]]

FACILITATOR: Does that sentence land for anyone? You don't have to say why.

[[Allow 30–60 seconds for any brief responses. Do not push. Move on.]]

PHASE 2

THE CHECK-IN

Approx. 15–20 minutes — every person speaks, no one is skipped

What This Phase Does

The check-in is the single most important element of the Kernel meeting. Everyone speaks. The format is identical for every person — same structure, same length, no testimony, no crosstalk. This is what makes it different from AA. There is no shame spiral. There is no applause for pain. The check-in is a data read: where is your system right now? Nothing more.

The facilitator models the check-in first. Then goes around the room. For groups over 15, use a shorter version (marked below).

FACILITATOR: Now we check in. Same format for everyone. I'll go first to show you how it works.

THE CHECK-IN FORMAT:

The Three Questions — Spoken by Each Participant in Order

- 1. Your name — just your first name.
- 2. One word for how your body feels right now. Not your story — just the physical state. Examples: tired, tight, okay, raw, steady, wired, heavy.
- 3. One sentence: what you need from this meeting today. Not what you've been through — what you need right now. It can be as simple as 'I need to sit somewhere quiet with other people' or 'I need to understand why I keep relapsing.'

That's it. No more than 30 seconds per person. The facilitator holds the time gently. After each check-in, the group responds together.

FACILITATOR: I'll model it. My name is [name]. My body feels [one word]. What I need today is [one sentence].
[[After each check-in — including your own — lead the group:]]

FACILITATOR: [Name], we hear you.
EVERYONE: [Name], we hear you.

[[NOT 'Hi Bob.' NOT applause. Not 'keep coming back.' Just: we hear you. It is enough.]]

Facilitator Notes on the Check-In

- No crosstalk during check-ins — no one responds to what someone shares except with the group response
- If someone starts telling their story instead of checking in, gently say: 'Hold that — we'll have space for that in a moment. Right now just: name, body, one sentence of need.'
- If someone passes, say: 'Completely fine. We'll come back if you want.' Then keep moving. Come back at the end.
- If someone becomes distressed during check-in, use the grounding phrase: 'You're in the room. You're safe right now. Name, body, one sentence — that's all we need from you.'
- For groups over 15: shorten to name + one word only. Save the 'what I need' for a smaller sharing circle.

PHASE 3

THE PROTOCOL SESSION

Approx. 25–35 minutes ★ — the main work of the meeting

What This Phase Does

This is where the Kernel's content becomes practice. Each meeting focuses on one Protocol. The facilitator does NOT read the protocol aloud. The facilitator runs the exercise or discussion that lives inside the protocol — translated into plain language, without jargon, accessible to everyone in the room.

The Protocol Session has three parts: a plain-language introduction (2 minutes), a guided exercise or discussion (20–25 minutes), and a brief reflection (5 minutes). The full protocol is available for participants who want to go deeper — but the meeting itself requires nothing to be read.

FACILITATOR: Tonight we're working with [Protocol Name].
FACILITATOR: I'm going to tell you what it's about in plain language. Then we're going to do something — not just talk about it.

Protocol Plain-Language Introductions — Use These Exact Words

Protocol 01 — Emergency Triage

'This one is about what to do when everything falls apart at once. Not what to think — what to DO. We're going to map out your personal emergency plan so that when the worst moment comes, you don't have to figure it out then.'

Protocol 03 — Sonic Architecture

'This one is about sound as medicine. Your nervous system responds to music and frequency in documented, measurable ways. We're going to find out what sounds help you — and map when to use them.'

Protocol 06 — Phenotype Assessment

'This one helps you figure out what kind of brain you have. Not smart or dumb — the specific way your brain handles stress and reward. Two types: one type needs more intensity to feel alive; the other needs more calm. Knowing which one you are changes everything about what recovery looks like for you.'

Protocol 10 — Dopamine Architecture

'This one is about the brain chemical that drives motivation and reward. Addiction hijacks it. Recovery is about building it back through real things instead of chemical ones. We're going to figure out what real things give your brain the signal it needs.'

Protocol 16 — Isolation Algorithm

'This one is about why people in recovery pull away from other people — and why that makes sense as a survival move, but slowly kills you. We're going to map your isolation pattern and find one doorway back.'

Protocol 17 — Sleep Architecture

'This one is about sleep — which is not optional. Bad sleep is one of the top causes of relapse. We're going to look at your sleep honestly, figure out what is breaking it, and build one habit that starts fixing it tonight.'

Protocol 19 — Exercise Pharmacology

'Movement is medicine. Not because it feels good — because it literally changes the chemistry in your brain in the same direction that substances changed it, without the debt. We're going to find the kind of movement that matches your brain type and actually build it into your week.'

Protocol 20 — Craving Cartography

'Cravings are not random. They follow patterns — times of day, emotional states, places, people. This protocol is about mapping your specific pattern so you can see it coming. You cannot stop what you cannot see.'

Protocol 21 — Relapse Forensics

'This one is for after a relapse. Not for judgment — for information. Every relapse is data. If you can read it, you can prevent the next one. We are going to read it together — without shame.'

Protocol 22 — Family System Dynamics

'This one is about family — what role you play in your family system, how the system around you might be making recovery harder, and how to navigate it without destroying the relationships you want to keep.'

Protocol 25 — Spiritual Agnosticism

'This one is for people who do not want to use the word God in their recovery — and for people who do. It is about finding what gives your life meaning regardless of what you believe. Purpose is not a spiritual luxury. It is a neurological need.'

Protocol 28 — Zero-Trust Brain

'This one is about the hypervigilance that comes with trauma and addiction — the brain that never fully turns off the alarm. We are going to understand why your brain does this, and find one practice that starts to teach it that the threat has passed.'

The Universal Meeting Exercise — Use When No Specific Protocol Is Assigned

When a meeting has no assigned protocol, or when the group is new and a specific protocol would be premature, use this exercise. It works for any group, any recovery stage, any literacy level.

The Three Columns

Give each person a blank piece of paper or ask them to visualize. Three columns:

- Column 1: What I used to get from the substance — not what it did to you, what it gave you. Calm? Energy? Belonging? Courage? Pain relief? Sleep? Just write or think the word.
- Column 2: What I have now instead — or what I'm trying to build. Could be nothing. That's honest.
- Column 3: One thing that might go in Column 2 that isn't there yet.

Spend 10 minutes doing this individually. Then go around the room: each person shares one thing from any column — just a word or a sentence. No more. Facilitator holds time.

This exercise surfaces the actual function the substance was serving — without requiring anyone to read, understand pharmacogenomics, or have any prior recovery knowledge. It works on day 1.

[[After the exercise, bring the group back together:]]

FACILITATOR: What did you notice? You don't have to explain — just one word or one sentence.
[[Go around briefly. 10–15 seconds per person. No crosstalk.]]

PHASE 4

THE CLOSE

Approx. 10 minutes — anchors what happened and sends people out with something

What This Phase Does

The close does three things: it names what happened (brief facilitator reflection), it gives each person one concrete thing to do before the next meeting, and it ends with the closing ritual — the one piece of language everyone takes out the door.

FACILITATOR: Before we close — I want to name what just happened here.
[[Brief, honest, specific. 2–3 sentences about what you actually observed in the room. Not praise. Not summary. What you saw. Example:]]
FACILITATOR: 'I saw people who came in tight and left with a little more room. I heard someone name something they've never said out loud before. That matters.'

THE ONE THING
FACILITATOR: Before we close — one thing. Not a list. Not a plan. One thing you're going to do before we meet again that moves in the direction we talked about tonight.

[[Go around the room. Each person names one thing. Could be as small as 'drink water before bed' or 'text one person.' Facilitator writes them down if possible — or just holds them.]]

THE CLOSING RITUAL

FACILITATOR: We close the same way every time. Say it with me.

FACILITATOR: The biology can be understood.
EVERYONE: The biology can be understood.

FACILITATOR: The pattern can be changed.
EVERYONE: The pattern can be changed.

FACILITATOR: The work is real and the work is worth doing.
EVERYONE: The work is real and the work is worth doing.

FACILITATOR: Come back.
EVERYONE: Come back.

[[That's it. Meeting closed. Stay as long as you need.]]

THE RECOVERY KERNEL

Protocol Navigation System

Which protocol applies to you, right now, in plain language.

How to Use This System

You do not start at Protocol 1 and work through to Protocol 44. The Kernel is not a linear curriculum — it is a modular library. You find the protocol that applies to your situation right now, and you start there.

Three ways to navigate: by your current situation (the Symptom Index below), by your stage of recovery (the Three Tracks), or by the domain of your life that needs the most attention right now (the Domain Map). All three lead to the same protocols — just from different starting points.

You will likely be working 2–3 protocols at any given time: one foundational (always), one situational (what's hard right now), one growth-oriented (where you want to go). The meeting format helps you hold all three.

Navigation 1

The Symptom Index

Start here if you don't know where to start — plain language, no jargon

Find the sentence that most closely describes where you are right now. The protocol listed is your starting point.

EMERGENCY — Start Here If Any of These Apply Right Now

- I am thinking about hurting myself or someone else → Call 911 or text 988 now. Then Protocol 01.
- I am in withdrawal and my hands are shaking or I've had seizures before → Medical emergency. Call 911. Then Protocol 01.
- I just used after a period of being clean → Protocol 01 first, then Protocol 21.
- Everything has collapsed at once — I cannot think → Protocol 01. Do not read anything else until you have done Protocol 01.

What You're Experiencing Right Now	Start With This Protocol
I can't sleep — or I sleep all the time and still feel	Protocol 17 — Sleep Architecture

exhausted	
I keep relapsing and I don't understand why	Protocol 21 — Relapse Forensics, then Protocol 20 — Craving Cartography
I'm clean but I feel nothing — flat, gray, bored, numb	Protocol 10 — Dopamine Architecture, then Protocol 06 — Phenotype Assessment
I'm anxious all the time and I can't turn it off	Protocol 34 — Cognitive Stabilization, then Protocol 06 — Phenotype Assessment
My body feels terrible — stomach, digestion, constant low-grade sick	Protocol 09 — Gut-Brain Axis, then Protocol 18 — Nutritional Scaffolding
I'm in pain and I'm scared of opioids or I'm already dependent on them	Protocol 14 — Pain Management Precision, then Protocol 13 — Pharma-Trap
My medications aren't working or are making things worse	Protocol 13 — Pharma-Trap Deprescribing, then Protocol 06 — Phenotype Assessment
I'm addicted to my phone, gaming, gambling, sex, or shopping — not substances	Protocol 02 — Behavioral Addictions, then Protocol 05 — Digital Detox
I don't want to go to AA but I need some kind of community or support	Protocol 04 — Meeting Alternatives
I'm pulling away from everyone and I know it's bad but I can't stop	Protocol 16 — Isolation Algorithm
I don't know who I am anymore without the substance	Protocol 07 — Neuroplasticity, then Protocol 25 — Spiritual Agnosticism
My family is making recovery impossible	Protocol 22 — Family System Dynamics, then Protocol 33 — Boundary Architect
I have children and I'm trying to do this while parenting	Protocol 31 — The Parent Trap
I'm broke and the financial stress is driving me toward using	Protocol 23 — Financial Reconstruction
I lost my job or I can't work and I don't know what I am without it	Protocol 24 — Vocational Reintegration
I was just released from jail or a facility — I'm starting over	Protocol 32 — The Forced Migration
I hate everything about my body — weight, sex drive, appearance	Protocol 15 — Sexual Dysfunction Restoration, then Protocol 18 — Nutritional Scaffolding

I'm clean but I'm bored and that's when I use	Protocol 29 — The Peacetime Paradox, then Protocol 10 — Dopamine Architecture
Something smells or sounds like using and I can't get it out of my head	Protocol 27 — Clearing the Cache
I'm scared of everything and everyone — I can't trust anyone	Protocol 28 — Zero-Trust Brain
I feel like there's no point — no meaning, no reason to bother	Protocol 25 — Spiritual Agnosticism, then Protocol 10 — Dopamine Architecture
I want to understand why I got addicted — the real reason, not the moral one	Protocol 06 — Phenotype Assessment, then the Main Book Part One
I'm doing well and I want to go further	Protocol 11 — Advanced Optimization
Music helps me more than anything else — I don't know why	Protocol 03 — Sonic Architecture
I want to understand what the language of recovery is actually doing to me	Protocol 26 — Linguistic Refactoring
My doctor says I have ADHD or bipolar or something — I think they're wrong	Protocol 30 — The Falsification Curiosity
I'm in a relationship with someone who is still using	Centurian Paper C-26 — Intimate System Interference

Navigation 2

The Three Tracks

Which stage of recovery are you in?

If you are not sure which protocol to start with, your stage of recovery is the simplest guide. These three tracks are not rigid — you can be in all three at once. But they give you a starting point.

TRACK ONE — STABILIZATION (Days 1 through 90 approximately)

You are new, in crisis, or restarting after a relapse. The goal is not growth yet — the goal is stability. Getting safe, getting grounded, getting the basic biological conditions in place.

- Start: Protocol 01 — Emergency Triage (always available, always valid)
- Foundation: Protocol 17 — Sleep; Protocol 18 — Nutrition; Protocol 12 — Hydration
- Biology: Protocol 06 — Phenotype Assessment (understand your brain type early)
- Community: Protocol 04 — Meeting Alternatives (find your people)
- Understanding: Main Book Part One — Why Willpower Isn't Enough

Do not try to do more than these until you have slept three consecutive nights, are eating once a day minimum, and have one person who knows what's happening. That is the floor. Everything else is built on top of it.

TRACK TWO — RECONSTRUCTION (Months 3 through 12 approximately)

You have some footing. You're not in daily crisis. Now the work is rebuilding — the parts of life that addiction damaged or prevented.

- Biological rebuilding: Protocol 09 — Gut-Brain; Protocol 10 — Dopamine Architecture; Protocol 19 — Exercise
- Pattern work: Protocol 20 — Craving Cartography; Protocol 21 — Relapse Forensics
- Relationships: Protocol 08 — Social Environment; Protocol 16 — Isolation; Protocol 22 — Family
- Brain retraining: Protocol 07 — Neuroplasticity; Protocol 28 — Zero-Trust Brain
- Specific conditions: Protocol 14 (pain), 15 (intimacy), 13 (medications) — as relevant
- Understanding: Main Book Part Two (the forensic evidence) and Part Three (protocols)

Work one protocol per week in a meeting or solo. Go deep rather than fast. The brain rewires slowly and needs repetition.

TRACK THREE — INTEGRATION (Year 1 and beyond)

Recovery is no longer the primary project — life is. The work now is building a life so well-matched to your biology that the substances become irrelevant rather than merely resisted.

- Optimization: Protocol 11 — Advanced Optimization; Protocol 29 — Peacetime Paradox
- Identity: Protocol 25 — Spiritual Agnosticism; Protocol 26 — Linguistic Refactoring
- Purpose: Protocol 24 — Vocational Reintegration; Protocol 23 — Financial

Reconstruction
- Peak function: Protocol 03 — Sonic Architecture; Protocol 05 — Digital Detox
- Understanding: Main Book Part Four + Centurian Papers (the deep dive)

Track Three protocols are available from day one — if someone in early recovery is drawn to Protocol 25 (meaning) or Protocol 11 (optimization), that instinct is worth following. The tracks are guides, not gatekeeping.

Navigation 3

The Protocol Library

All 44 protocols mapped by plain-language function

P#	Protocol Name	Plain Language Name	What It Does for You
01	Emergency Triage	When Everything Crashes	Immediate stabilization when you're in crisis — step by step, no decisions required
02	Behavioral Addictions	When It's Not a Substance	For gambling, gaming, sex, shopping — same brain mechanism, different delivery
03	Sonic Architecture	Sound as Medicine	How music and frequency change your nervous system — and how to use that deliberately
04	Meeting Alternatives	Recovery Without AA	SMART, Refuge, secular options — if the 12-step format doesn't work for you
05	Digital Detox	Getting Off Your Phone	Screen addiction is real; this resets the dopamine system around technology
06	Phenotype Assessment	What Kind of Brain Do I Have?	Warrior or Worrier — understanding your stress and reward type changes everything
07	Neuroplasticity	How to Rewire	The brain changes with repetition; this maps how to use that deliberately
08	Social Environment	Building the Right Room	Who you spend time with is pharmacological; this helps you redesign that
09	Gut-Brain Axis	Your Gut Is Part of Your Brain	90% of serotonin is made in the gut; this repairs the gut-brain connection
10	Dopamine Architecture	Rebuilding the Motivation System	How to get your brain producing reward chemicals from real activities again
11	Advanced Optimization	Going Further	For people with stable recovery who want to build peak function

12	Hydration Science	Water Is Medicine	Dehydration mimics and amplifies every negative state; this fixes the foundation
13	Pharma-Trap Deprescribing	Getting Off Medications Safely	For people who've been over-prescribed or want to taper safely
14	Pain Management Precision	Pain Without Opioids	Non-opioid pain protocols matched to your genetic profile
15	Sexual Dysfunction Restoration	Getting Your Sexuality Back	Libido and function recovery — addiction damages this; recovery restores it
16	Isolation Algorithm	Why You Pull Away	The logic of social withdrawal — and how to reverse it without force
17	Sleep Architecture	Actually Sleeping	Circadian restoration; the most critical single protocol for preventing relapse
18	Nutritional Scaffolding	Eating for Your Brain	Specific foods and timing that support neurotransmitter production
19	Exercise Pharmacology	Movement as the Drug	The right kind of movement for your brain type — matched to your COMT profile
20	Craving Cartography	Mapping Your Triggers	Cravings follow patterns; map yours before they map you
21	Relapse Forensics	Reading What Went Wrong	Post-relapse analysis — turns failure into data instead of shame
22	Family System Dynamics	Navigating Family	Your family has a role for you; this helps you change it without blowing everything up
23	Financial Reconstructio n	Money After Addiction	Rebuilding economic stability — practical, non-judgmental, step by step
24	Vocational Reintegration	Going Back to Work	Career recovery — how to navigate employment after addiction history
25	Spiritual Agnosticism	Finding Meaning Without Religion	Purpose is a neurological need; this works whether you believe in God or not
26	Linguistic Refactoring	The Language of Recovery	The words we use about addiction either help or harm; this maps which ones
27	Clearing the Cache	When the Past Shows Up in Your Body	Phantom smells, flashbacks, sensory ghosts — this explains and addresses them
28	Zero-Trust Brain	When You Can't Relax	Hypervigilance from trauma and addiction — why you're always waiting for disaster
29	The Peacetime Paradox	When Stable Feels Wrong	For Warriors who find calm boring enough to blow up; intensity addiction

30	Falsification Curiosity	Being Your Own Advocate	How to use biomarker testing to challenge diagnoses that don't fit
31	The Parent Trap	Recovery With Kids	Parenting during withdrawal; home detox when inpatient isn't an option
32	Forced Migration	Starting Over From Nothing	Surviving incarceration, homelessness, or forced system change
33	Boundary Architect	Drawing Lines That Hold	How to set and maintain limits without destroying relationships
34	Cognitive Stabilization	Quieting the Intrusive Thoughts	The mental noise of early recovery — why it happens and how to reduce it

THE RECOVERY KERNEL

PARTICIPANT CARD

Keep this. Bring it to every meeting.

The Purpose — Say It Out Loud

We are not broken.

We are running on biology that was never explained to us.

We are here to understand it — and build a life that works with it.

The Meeting Format — What Happens

- OPEN — Breath. Water. Purpose statement. One sentence from the Kernel.
- CHECK-IN — Name. One word for how your body feels. One sentence: what you need today.
- SESSION — One protocol. Plain language. We do it together — we don't just read about it.
- CLOSE — One thing you'll do before next meeting. Closing words together.

If You're in Crisis Right Now

Medical emergency or immediate danger: CALL 911

Suicidal thoughts: CALL OR TEXT 988

Substance overdose — give Narcan if available. Call 911.

SAMHSA Helpline: 1-800-662-4357

The Closing — Say It Together

The biology can be understood.

The pattern can be changed.

The work is real and the work is worth doing.

Come back.

My one thing this week:

_____

Next meeting:

Date: _____ Time: _____ Place: _____

THE RECOVERY KERNEL

The 12-Meeting Core Curriculum

The foundational sequence — one meeting per protocol — for new groups and new participants.

Why 12 Meetings?

Twelve meetings is the minimum functional curriculum — long enough to establish the foundational practices, short enough that any participant can commit to attending all of them. After the 12-meeting cycle, participants can continue with the extended curriculum, return to any protocol that needs deeper work, or begin facilitating themselves.

The 12 meetings are not the same as the 12 Steps. There is no linear moral progression. Meeting 1 is not 'admission of powerlessness' — it is Emergency Triage, which is immediately practical regardless of where someone is. Meeting 12 is not a promise to evangelize — it is Phenotype Assessment, which gives participants the scientific framework for understanding everything they have experienced in the previous eleven meetings.

The sequence is designed so that each meeting builds on the last, but no meeting requires attendance at previous meetings to be useful. Someone can walk in on meeting 7 and benefit fully from that session.

Meeting	Protocol	Plain Language Theme	What Participants Leave With
1	P01 — Emergency Triage	When Everything Crashes — and What to Do	Personal emergency plan; 911/988 numbers written down; the HALT+ body check memorized
2	P17 — Sleep Architecture	Sleep Is Not Optional	One sleep hygiene change implemented; understanding that sleep deprivation causes relapse
3	P18 — Nutritional Scaffolding	Eating for Your Brain	One nutritional change; understanding that hunger amplifies every negative state
4	P20 — Craving Cartography	Mapping Your Triggers	Personal trigger map — times, places, emotions, people; one interception strategy
5	P16 — Isolation Algorithm	Why You Pull Away — and the Way Back	Named their isolation pattern; identified one low-stakes social re-entry point
6	P10 — Dopamine	Rebuilding What Substances Hijacked	Named what the substance was giving them; identified one real-world

	Architecture		replacement
7	P03 — Sonic Architecture	Sound as Medicine	Created a personal sonic protocol — music for crisis, calm, and motivation
8	P07 — Neuroplasticity	How the Brain Actually Changes	Understands repetition as the mechanism; has one new habit in progress
9	P22 — Family System Dynamics	Navigating the People Who Love You and Make It Hard	Named their family role; identified one boundary that would help
10	P21 — Relapse Forensics	Reading What Went Wrong Without Shame	Can analyze a relapse (their own or a hypothetical) as data, not failure
11	P25 — Spiritual Agnosticism	Finding a Reason That Doesn't Require a God You Don't Believe In	Named one source of meaning that does not depend on substances
12	P06 — Phenotype Assessment	What Kind of Brain Do I Have?	Identified as Warrior or Worrier; understands how this shapes everything they've experienced in the previous 11 meetings

After the 12-Meeting Cycle

At the end of the 12-meeting cycle, the group should make two decisions together: which protocol to go deeper on (almost every group will have one or two that generated the most energy — return to those), and whether any participant is ready to begin facilitating.

Extended Curriculum — Next 12 Protocols

- Meeting 13: P08 — Social Environment Engineering (rebuilding your people)
- Meeting 14: P19 — Exercise Pharmacology (movement matched to your brain type)
- Meeting 15: P09 — Gut-Brain Axis (the gut is part of the recovery)
- Meeting 16: P28 — Zero-Trust Brain (hypervigilance and how to reduce it)
- Meeting 17: P34 — Cognitive Stabilization (quieting the noise of early recovery)
- Meeting 18: P29 — Peacetime Paradox (for Warriors: when calm feels wrong)
- Meeting 19: P23 — Financial Reconstruction (money after addiction)
- Meeting 20: P24 — Vocational Reintegration (work after addiction)
- Meeting 21: P14 — Pain Management (non-opioid approaches)
- Meeting 22: P13 — Pharma-Trap (getting off medications that aren't helping)
- Meeting 23: P33 — Boundary Architect (drawing lines that hold)
- Meeting 24: P11 — Advanced Optimization (going further in established

recovery)

How to Become a Facilitator

There is no certification required to facilitate a Kernel meeting. There is a preparation sequence:

- Attend at least one full 12-meeting cycle as a participant — understand what it feels like from inside before you run it
- Read the full facilitator script until you are comfortable with it — you do not need to memorize it; you need to be familiar enough that you can look up and make eye contact while delivering it
- Run the meeting format once with a small group (2–4 people) before facilitating a larger group — the feedback loop is faster
- The most important facilitator skill is time-holding: keeping the check-in at 30 seconds per person, keeping the exercise on track, keeping the close unhurried. Practice holding time before anything else.

The Kernel does not have facilitator certification because certification creates gatekeeping, and gatekeeping is what conventional recovery has used to exclude the people who need it most. Anyone who has worked through the 12-meeting curriculum and understands its purpose can facilitate. The format is the safeguard, not the credential.